PTO/SB/81 (01-09) Approved for use through 11/30/2011. OMB 0851-0035

	U.S. Palent and Trademark Office: U.S. DEPARTMENT OF COMMERC
Under the Paperwork Reduction Act of 1995, no persons are required to re	spond to a collection of Information unless it displays a valid OMB control number

POWER OF ATTORNEY OR **REVOCATION OF POWER OF ATTORNEY** WITH A NEW POWER OF ATTORNEY AND **CHANGE OF CORRESPONDENCE ADDRESS**

to respond to a collection of into	imation unless it displays a valid OMB control number
Application Number	10/551,004
Filing Date	April 12, 2007
First Named Inventor	Henning WALCZAK
Title	FC FUSION PROTEINS
Art Unit	1647
Examiner Name	LOCKARD, Jon McClelland
Attorney Docket Number	20479.0004.PCUS00

I hereby revoke a	Il previous powers of attorney given in t	he above-lde	ntified application.					
	torney is submitted herewith.							
OR	•							
Number as my identified abov and Trademar	Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:		27194					
I hereby appoi	OR I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:							
	Practitioner(s) Name	Registration Number						
Please recognize or ch	ange the correspondence address for the above	-identified applica	ation to:					
	sociated with the above-mentioned Customer No							
OR								
The address as	ssociated with Customer Number:							
OR								
Firm or Individual Name								
Address								
City		State	Zip					
Country Telephone		Concl						
I am the:		Email						
Applicant/Inven	tor.							
OR								
	or d of the entire interest. See 37 CFR 3.71. Assiç r 37 <i>CFR 3.73(b) (Form PTO/SB/</i> 96) submitted h							
	SIGNATURE of Applicant							
Signature	incomes to get	**************************************	Date 02/17/10					
Name	Dr. Thomas Höger		Telephone					
Title and Company	CEO, Apogenix GmbH							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below."								
*Total of	forms are submitted,							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 8ox 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (01-09)

Approved for use through 11/30/2011. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Discollection of Information unless it displays a valid OMB control number.

_	Under the Paperwork Reduction Act of Isas, no hersons are redused	IN IESPOND IN a postaventi di usta	inabon divisor in anopuly of the contract of t
		Application Number	10/551,004
	POWER OF ATTORNEY	Filing Date	April 12, 2007
	OR	First Named Inventor	Henning WALCZAK
REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND		FC FUSION PROTEINS	
	Art Unit	1647	
_	CHANGE OF CORRESPONDENCE ADDRESS	Examiner Name	LOCKARD, Jon McClelland
CHANGE OF CORRESPONDENCE ADDICESS	Attorney Docket Number	20479.0004.PCUS00	

I hereby revoke all previous powers of attorney given in t	he above-iden	tified applicat	ion.		
A Power of Attorney is submitted herewith.					
OR					
I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:		27194			
OR I hereby appoint Practitioner(s) named below as my/our attorned to transact all business in the United States Patent and Trader	ey(s) or agent(s) to	prosecute the a	pplication identified above, a	ind	
Practitioner(s) Name	THE CHICA COLUMN	Registration Number			
	ļ				
	<u> </u>				
Please recognize or change the correspondence address for the above	p-identified applica	ition to:			
The address associated with the above-mentioned Customer N					
OR	turiber.				
				\neg	
The address associated with Customer Number:					
Plan	<u> </u>				
Firm or Individual Name					
Address					
City	State		Zip		
Country					
Telephone	Email				
l am the:					
Applicant/Inventor.					
OR Assignee of record of the entire interest. See 37 CFR 3.71. As	eignaa of an undiv	ided internet in th	se entirety		
Assignee of record of the entire interest. See 37 CFR 3.71. As Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted	•				
/ SIGNATURE of Applica					
Signature OUL COM		Date	Telomany 22	20/0	
Name Dr. Ruth Herzog		Telephone			
Title and Company Head of Technology Transfer Office, Deutsches Krebsforschungszentrum		Offentlichen R	echts		
NOTE: Signatures of all the inventors or assignees of record of the entire interesignature is required, see below*.	st or their representa	tive(s) are required	. Submit multiple forms if more ti	an one	
*Total of forms are submitted.					

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.